



Vacation Bible School
 July 25—29, 2011/ 9 AM—12 Noon
REGISTRATION FORM

Family Last Name _____

Address _____

Phone _____ Cell _____

Email _____

Child #1 _____ Birth Date : _____ Last Grade Completed: _____ Where: _____ Allergy Information _____ _____	Child #2 _____ Birth Date: _____ Last Grade Completed: _____ Where: _____ Allergy Information _____ _____
Child #3 _____ Birth Date: _____ Last Grade Completed: _____ Where: _____ Allergy Information _____ _____	Child #4 _____ Birth Date: _____ Last Grade Completed: _____ Where: _____ Allergy Information _____ _____

Other Emergency Contact: Name _____

Phone Number _____ Relationship to Child _____

Does your family have a church home? Y or N If yes, where? _____

May we have permission to photograph your child? Y or N

** Registration fee of \$15/child but not to exceed \$30/family **